STATE OF WISCONSIN)
) SS
DEPARTMENT OF WORKFORCE)
DEVELOPMENT)

TO THE PEOPLE OF THE STATE OF WISCONSIN:

- I, Raymond Allen, Secretary of the Wisconsin Department of Workforce

 Development and custodian of the department's official records, certify all of the following:
- (1) The department adopted the attached emergency rule on January _______,

 2017. The emergency rule relates to pre-employment drug testing, substance abuse treatment program and job skills assessment.
 - (2) The emergency rule takes effect upon publication in the official state newspaper.
- (3) I have compared the attached copy of the emergency rule with the original kept by the department. The attached copy is a complete and accurate copy of the original.

Signed and sealed this _____ of January, 2017, at the department offices in Madison, Wisconsin.

Raymond Allen, Secretary

